

Appendix E – Sample Performance Evaluation

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USDA Forest Service

R10-2700-16 (1/99)

ALASKA REGION OUTFITTER/GUIDE PERFORMANCE EVALUATION

Mid-Summer Evaluation (circle one) Annual Evaluation

_____ **Operating Season**

Name of Holder: _____

District/Monument: Juneau Ranger District Type of Operation: _____

Location and/or Camp Number: MGRA Date Inspected: _____

Circle Appropriate Responses:

Holder Representative Present: Yes No

Camp in Operation: Yes No

Evaluation:

A - Acceptable; **UN** - Unacceptable; **NI** - Needs Improvement; **NC** - Not Checked; **NA** - Not Applicable

<u>A. Site:</u>	A	UN	NI	NC	NA
1. All improvements are authorized by permit, location and development as authorized.					
2. Clean up and sanitation in accordance with permit.					

Comments:

<u>B. Permit Compliance:</u>	A	UN	NI	NC	NA
1. Compliance with terms of permit and operating plan.					
2. Insurance submitted on time and complete.					
3. Signed permit submitted on time and complete.					
4. Payments received by due date.					
5. Holder submitted/dated/corrected operating plan.					
6. Actual use reports completed and submitted on time.					
7. Compliance with Federal, State, Borough, laws and regulations					
8. Compliance with Title VI, Nondiscrimination (Clause B-1)					
9. Holders advertising refers to use on National Forest lands (Clause X-30)					

Comments:

<u>C. Public Service:</u>	A	UN	NI	NC	NA
1. Holder behaves professionally toward the people they serve, other agencies and other permit holders, and during					

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interactions with the Forest Service. (Clause B-101).					
2. Number and qualifications of employees meets permit specifications.					
3. Clients provided with health and safety standards as provided in the approved operating plan/safety plan.					
4. Equipment provided meets health and safety standards as required in the approved operating plan.					
5. Rates, services, and/or accommodations provided as submitted in the approved operating plan					

Comments:

Tally of comments received from clients/public: _____ Positive comments _____ Negative Comments

Evaluator(s) _____ Date _____

Prior Performance (if applicable): N/A

Are items from last performance evaluation corrected? Yes No (circle one)

Comments and/or Corrective Action Needed:

Mid Season Rating: Acceptable Probationary Unacceptable **(circle one)**

Annual Rating: Acceptable Probationary Unacceptable **(circle one)**

The annual rating is subject to appeal under 36 CFR 214. The District/Monument Ranger is willing to meet with the holder to discuss any concerns, or issues related to this evaluation. Any appeal and a statement of reasons must be submitted to the Tongass Forest Supervisor at 648 Mission Street, Ketchikan, AK 99901 within 45 days of the date of the annual rating.

Comments on Rating (space is available for Forest Service and Holders comments):

Forest Service comments:

Holder's comments:

District/Monument Ranger: _____ Date: _____

Holder: _____ Date: _____